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In re Patent Application of

Masami SHIMIZU

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Examiner: John P. LEUBECKER

For: OPERATING MECHANISM FOR MEDICAL DEVICE

VIA EFS-WEB

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

SUBMISSION

Sir:

Submitted herewith is a copy of art together with a form listing the same for the convenience of the Examiner.

I respectfully request that the information submitted be considered and enclose credit card payment for the required filing fee of \$ 180.00 is being submitted via EFS-WEB.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee due during the pendency of this application is not paid, the Patent and Trademark Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

Respectfully submitted,

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MM:kc



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